



PACIFICA
GRADUATE INSTITUTE

Extended Academic Tutorial Request & Contract

STUDENT INFORMATION

Student Name:		Date:	
Student ID Number:		Track:	

CONTRACT INFORMATION

I, the undersigned, have reviewed the tutorial policy and request an Extended Academic Tutorial for the following:

Extended Academic Tutorial Information

Course Information:

Course ID #: _____ Title: _____

Quarter/Year Course Originally Taken: _____

Tutorial Start Date _____ Tutorial Due Date _____
(first day of month) (last day of third month)

Instructor Name _____

Objectives

Objectives for Completing
Tutorial Work:

You must begin an extended academic tutorial within two years of the original course date.

Prior to beginning the tutorial, discuss terms and conditions of the extended tutorial with the instructor, then complete this form and send to the instructor.

Prior to beginning the tutorial, the instructor must sign and submit the form to the Registrar.

Extended tutorials are a three-month contract, **beginning the first day of the month and ending no later than the last day of the third month. A new contract is required if additional time is needed to complete the coursework or if the tutorial did not receive a passing grade.**

The Registrar will send a copy of the contract to the Student Accounts Office for billing.

Submit your tutorial work and a Grade Change Form to the instructor on or before the due date. The instructor will submit the tutorial work and Grade Change Form to the Registrar (registrar@pacifica.edu) within 3 weeks from the due date.

A maximum of 2 tutorials are permitted to remediate a failing grade. Requests for additional tutorials require Education Council approval.

Revised: 10/2026

This completed and signed form must be submitted to the Registrar's Office prior to beginning the tutorial. If emailing form, student must submit this form from their My.Pacifica.edu student email account.

Required Signatures:

Student Date
☐ I certify that my typed name is my authorized signature

Instructor Date
I certify that my typed name is my authorized signature

Registrar Date

Approved ☐
Returned to faculty ☐
Reason for return _____